



**INDIAHIKES**  
The Indian Trekking Community

36, First Floor, First Main Road, Dena Bank Colony, Ganganagar, Bangalore 560032  
Phone: 09343831803, 07676409030 Email: info@indiahikes.in Website: www.indiahikes.in

## Personal Medical Record

### Personal details

Name:

Age:

Height (in meters):

Weight (in kgs):

BMI (kgs/metres<sup>2</sup>):

\*Online BMI calculation tools are easily available

1. Any previous illness - past 3 months (mention the nature and duration of illness)

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2. Any previous injuries – past 6 months (accident/sprain/fracture, etc)

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Present condition \_\_\_\_\_

3. Any operation undergone – past 6 months (mention the nature and result of the operation)

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4. Are you under medication of any kind? If yes, please mention details & medicines being taken

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5. Do you have any drug allergies?

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\*This medical certificate has to be printed, filled in and handed over to the trek leader at the base camp.

6. Do you have any previous exposure to high altitude treks? (If yes, please mention the name of the trek and altitude gained)

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7. Did you encounter any altitude related problems on your previous trek?

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8. Do you have any history of breathlessness (Yes/No): \_\_\_\_\_

9. Do you have any history of chest pain (Yes/No): \_\_\_\_\_

10. Have you ever suffered from Asthma or Pleurisy (Yes/No): \_\_\_\_\_

11. Any history of giddiness or fainting attacks (Yes/No): \_\_\_\_\_

12. Any history of Epilepsy or any other fits (Yes/No): \_\_\_\_\_

13. Any history of palpitations (Yes/No): \_\_\_\_\_

14. Any history of dysentery or jaundice (Yes/No): \_\_\_\_\_

15. Any history of recurring pain in the abdomen (Yes/No): \_\_\_\_\_

If there is any other information related to your health that would be useful to us in the case of emergencies, please mention them below.

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I \_\_\_\_\_, certify that the information mentioned above is true and correct to the best of my knowledge. I have not hidden any medical condition and have disclosed all my medical information to Indiahikes which will be useful to them in the case of an emergency.

**Place:**

**Date:**

**Signature**

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## Disclaimer and Declaration

**(To be filled in by the participant)**

The \_\_\_\_\_ trek route in the Himalayas has its share of risks and dangers, especially with respect to the terrain, weather, high altitude and desolate nature.

On a trek, altitude related issues/accidents can cause one to fall ill, get injured or may even lead to death.

I hereby declare that my participation in this trek is completely voluntary, and I am fully aware of the risks involved. I will not hold Indiahikes wholly or partly responsible in case of any accident, illness, injury or death on the trek.

Name:

Place:

Date:

Signature (above)

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## Emergency Contact Information

**(Enter the details of the emergency contact – family member only)**

Name:

Relationship:

Mobile:

Landline:

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## Green Pledge

I promise to be a responsible trekker and leave the mountain trails in a better condition than I find them. I will not pollute the trails, campsites or water bodies. I will bring back 'all' my own waste. As my contribution to leave the trail in a better condition, I will participate in activities to undo damage done by others to the environment.

Name:

Signature